

SERIAL NUMBER 09/171,690	FILING DATE 10/23/98	CLASS 180	GROUP ART UNIT 3611	ATTORNEY DOCKET 4501
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APPLICANT

HELMUT KANZLER, VOEHRINGEN, FED REP GERMANY; MICHAEL KUHN,
ILLERKIRCHBERG, FED REP GERMANY.

****CONTINUING DOMESTIC DATA*******
VERIFIED
FBI 5/31/00

****371 (NAT'L STAGE) DATA*******
VERIFIED THIS APPLN IS A 371 OF PCT/EP97/02151 04/25/97
FBI 5/31/00

****FOREIGN APPLICATIONS*******
VERIFIED FED REP GERMANY 296 07 651.1 04/26/96
FBI 5/31/00

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ <div style="display: flex; justify-content: space-between; width: 80%;"> Examiner's Initials Initials </div>	STATE OR COUNTRY DEX	SHEETS DRAWING 4	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 1
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ADDRESS

ARLENE J POWERS
SAMUELS GAUTHIER STEVENS & REPPERT
225 FRANKLIN STREET
SUITE 3300
BOSTON MA 02110

PHONE: (617) 426-9180

TITLE

PISTE-MAINTENANCE TRACKLAYING VEHICLE

FILING FEE RECEIVED \$1,084	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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****CONTINUING DOMESTIC DATA*******
VERIFIED

none

****371 (NAT'L STAGE) DATA*******
VERIFIED

yes

THIS APPLN IS A 371 OF PCT/EP97/02151 04/25/97

****FOREIGN APPLICATIONS*******
VERIFIED

yes

FED REP GERMANY 296 07 651.1 04/26/96

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DEX	SHEETS DRAWING 4	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 1
Verified and Acknowledged Examiner's Initials _____ Initials _____					

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SUITE 3300
BOSTON MA 02110

PHONE: (617)426-9180

TITLE

ROAD MAINTENANCE TRACKLAYING VEHICLE

FILING FEE RECEIVED \$1,084	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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